

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO.

FLING DATE

APPLICANT(S)

CLAIMS

AS FILED	APPROVED AMOUNT		APPROVED DEPOSIT	
	REG	DEP	REG	DEP
1	1		1	
2			1	+
3			1	+
4			1	
5			1	
6	2		2	
7	2		2	
8	2		2	
9			1	1
10	1		1	
11			1	1
12	2		2	
13	2		2	
14	2		2	
15	1		1	
16			1	1
17	1		1	
18			1	1
19			1	
20			1	
21			1	
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48				
49				
50				
TOTAL REG.	4		4	
TOTAL DEP.		24		23
TOTAL CLAIMS	28		23	

	REG	DEP	REG	DEP	REG	DEP
51						
52						
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TOTAL REG.

TOTAL DEP.

TOTAL CLAIMS